FOR INSTRUCTIONS, SEE BACK OF FORM

DISCL	<b>OSUR</b>	E SUMMA	RY PAGE

DISCLOSURE SUMMARY P	AGE Reset Form		R-2	
COMMITTEE NAME (Must be same as on Statement of	- <del></del>		. 07/2004)	DISCLOSURE REPORT
IMPORTANT: Indicate by * type of committee you are reporting (1) Statewide/Legislative/Judge Standing for Retention Candida (4) County Central Committee (5) County Candidate (6) City C Political Subdivision Candidate (8) County PAC (9) City PAC Subdivision PAC (11) Local Ballot Issue  CANDIDATE COMMITTEES ONLY:  Candidate Name  Office Sought	for: 4- compile the compile (2) State PAC (3) State Party candidate (7) School Board or Other Political  Political Party (if applicable)  District (if Senate or House)	Communication Logge Scann Computer Audited	ed In South Property and South P	subject to criminal AY
SIGNATURE OF PERSON FILING REPORT	rer (319) 372-82 TELEPHONE	60	/8/M	10 20/G
I AM FILING A May 19, 2010 (report date)	REPORT FOR (1) ELECTION Indicate by #	/(2)NON-E	LECTION YE	EAR. Of
CHECK IF AMENDMENT TO REPORT DATED		,	oos, enter Dat	
Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is fi	ce of Dissolution Form DR-3.	ounty & Locs	l Committees,	enter County in
STATEME	NT OF CASH ON HAND		•	
CASH ON HAND at the beginning of the reporting period. committee. This amount MUST be the same as the of the last reporting period or must be zero if this is	no cook on hand at the and	\$	1367	7.61
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Sch	nedule A) (*also see in-kind below)		1827	1.35
Schedule F: Loans Received total (Attach Schedu	ule F)			
Schedule H: Total Sales of Campaign Property (A	Attach Schedule H)			
(Schedule H applies to Candidates' Co				
	SUB-TOTA	L\$	319	4.96
SUBTRACT TOTAL MONEY SPENT THIS PERIO	OD			
Schedule B: Expenditures total (Attach Schedule	B) (**also see debts and loans belo	w)	82	7://
Schedule F: Loan Repayments total (Attach Sche	edule F)			· .
CASH ON HAND at the end of this reporting period (if final	report balanca must	_		
be zero) (Attach DR-3)	***************************************	\$	<u> 2367</u>	85
"UNPAID BILLS (From Schedule D - Attach Schedule D).		ę		
IN KIND CONTRIBUTIONS (From Schedule E - Attach Sc			9.	4.00
**OUTSTANDING LOANS (From Schedule F - Attach Sche			0	2100
CANDIDATE COMMITTERS ONLY:	oder ( )			****
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES	
VALUE OF CAMPAIGN PROPERTY (From Personal L.	Mark Oak ad 1 145		1E3	<u> </u>

For Instructions, See Back of Form

### CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization) Lcc County Democratic Central Committee

**GEORGE SHIELDS** 

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DAYE RECEIVED (MWDO/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER
1-14-10	ID# CK# <sub>10692</sub>	Jerry & Diane Kearns 402 Hickory Terr. Keokuk, IA 52632		\$100.00	INCOME
1-14-10	ID# CK#	Bob Morawitz & Bev Gobble 1405 Avenue D Fort Madison, IA \$2627	_	40.00	1
1-14-10	ID# CK#	Unitermized Contributions		22.00	<b>/</b>
1-23-10	ID# CK#	Rocky Menke 25 Richards' Urive Fort Madison, IA 52627		15.00	1
1-23-10	ID# CK# 2260	Janet Strunk 17 Tammy Lane Fort Madison, IA 52627		15.00	1
1-23-10	ID# CK# <sub>2773</sub>	E. Celine Schulte 212 Avenue F West Point, IA52656		15.00	1
3-11-10	ID# CK# <sub>2014</sub>	Goorge H. Shields 2803 Avenue J Fort Madison, IA 52627		15.00	7
3-11-10	ID# CK#	Grace Harris 2814 Avenue J Fort Madison, IA 52627		15.00	<b>/</b>
3-11-10	ID# CK#	Un-Itemized Contibutions		43.00	1
3-13-10	ID# CK# 7934	Teresa Garcia 1229 38th Street Fort Madison, IA 52627		15.00	<b>/</b>
			SUB-TOTAL	\$ 295.00	

TOTAL (if last page of this schedule) \* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consequently (blood relatives) and affinity (relatives by marriage). If summane of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

of 06 (for Schedule A)

For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization) Lee County Democratic Central Committee

**GEORGE SHIELDS** 

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 688.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (WM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RÉCEIVED	VIFFOR FUND RAISER INCOME
3-13-10	CK# <sub>2883</sub>	Dorothy Cookson 3020 Kochler Lane Montrose, 1A 52639		\$15.00	INCOME.
3-13-10	ID# CK# 4144	Mac Law 25 Melody Court Keokuk, IA 52632		15.00	1
3-13-10	CK# 1293	James Sholl 2109 Avenue J Fort Madison, IA 52627		15.00	1
3-13-10	ID# CK# 5258	Steve Ireland 1904 Avenuc D Fort Madison, IA 52627		15.00	1
3-13-10	CK# 12594	Rick Larkin 1304 Avenue B Fort Madison, IA 52627		20.00	1
3-13-10	ID# CK# 2145	Nancy Booten 3020 Timberlane Drive Fort Madison, IA 52627		15.00	1
3-13-10	ID# CK# <sub>7622</sub>	Gary Foliuo 1628 Palcan Street Kcokuk, IA 526 <b>3.2</b>		15.00	1
3-13-10	CK# <sub>6796</sub>	Ernest Schiller 2063 Hwy. #2 Donnellson, IA 52625		40.00	1
3-13-10	CK# 1325	John & Louise Orozco 3708 Whispering Lane Keokuk, IA 52632		30.00	1
3-13-10	ID# CK# 6905	Mike Short 3925 250th Avenue Keukuk, IA 52632		30.00	1
•			SUB-TOTAL	<b>\$</b> 210.00	
		TOTAL (If last p	ege of this schedule)		

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the Committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

02 06 of. (for Schedule A)

#### For instructions, See Back of Form

#### CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

**GEORGE SHIELDS** 

Lee County Democratic Central Committee

Reset Form	SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
٦	_	CK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE" (if applicable)	RECEIVED	FUND RAISER
3-13-10	ID# CK# <sub>1082</sub>	Kearns for State Representative Committee Lee County, IA		\$100.00	INCOME
3-13-10	ID# CK# 2146	Nancy Booten 3020 Timberlane Drive Fort Madison, IA 52627		25.00	<b>_</b>
3-13-10	ID# CK# 12595	Rick Larkin 1304 Avenue B Fort Madison, IA 52627		20,00	7
3-13-10	CK# 7623	Gary Folluo 1628 Palean Street Keokuk, IA 52632		30.00	1
3-13-10	ID# CK# <sub>2741</sub>	Beverly Gobble 1405 Avenue D Fort Madison, IA 52627		85.00	<b>~</b>
3-13-10	ID# CK# <sub>9781</sub>	Michelle Jarvis 3001 Avenue P Fort Madison, IA 52627		72.00	1
3-13-10	CK# 1318	Louise Orozco 3708 Whispcring Lane Kcokuk, IA 52632		8.00	<b>4</b>
3-13-10	ID# CK# <sub>2020</sub>	George Shields 2803 Avenue J Fort Madison, IA 52627		20.00	<b>4</b>
3-13-10	CK#	Jim Posz 919 Old Denmark Hill Fort Madison, IA 52627		15.00	1
3-13-10	ID# CK#	Janet Delancy 1334 Avenue B Fort Madison, IA 52627		15.00	<b>/</b>
			SUB-TOTAL	\$ 390.00	,

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

03 04 of (for Schedule A)

TOTAL (If last page of this schedule)

For instructions, See Back of Form

#### CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

**GEORGE SHIELDS** 

COMMITTEE NAME (Must be same as on Statement of Organization)	
Lee County Democratic Central Committee	

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NOING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

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DATE RECEIVED (MWDD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	V IF FOR FUND- RAISER
3-13-10	CK#	Robert Morawitz & Bev Gobble 1405 Avenue D Fort Madison, IA 52627		\$30.00	INCOME.
3-13-10	ID#	Denise Fraisc 2319 Avenue F Fort Madison, IA 52627		15.00	1
3-13-10	CK#	Jim Sholl 2109 Avenue J Fort Madison, IA 52627		15.00	1
3-13-10	ID# CK#	Rocky Menke 25 Richards Drive Fort Madison, IA 52627		15.00	1
3-13-10	ID# CK#	Janet Strunk 17 Tammy Lane Fort Madison,IA 52627		15.00	<b>V</b>
3-13-10	CK#	Grace Harris 2814 Avenue J Fort Madison, IA 52627		15.00	4
3-13-10	ID# CK#	George Shields 2803 Avenue J Fort Madison, IA 52627		15.00	~
3-13-10	ID# CK#	Toby & Michelle Jarvis 3001 Avenue P Fort Madison, IA 52627		30.00	<b>4</b>
3-13-10	CK#	Anne Pedersen 506 33rd Street Fort Madison, IA 52627		15.00	7
3-13-10	ID# CK#	Janet Fife-LaFrenz 1122 Grand Avenue Kookuk, IA 52632		15.00	<b>1</b>
			SUB-TOTAL	s 180.00	

TOTAL (If last page of this schedule)

04 (for Schedule A) 06

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.





#### CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

GEORGE SHIELDS

Lee County Democratic Central Committee

CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE KYMA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	RECEIVED	V IFFOR FUND- RAISER INCOME
3-13-10	(D# CK#	Jerry & Diane Kearna 402 Hickory Terrace Keokuk, IA 52632		\$30.00	1
3-13-10	CK#	Donald Alter Donnaldson, IA 52625		15,00	1
3-13-110	CK#	John Pomberg 1062 172nd Avenue Salem, IA 52649		15.00	1
3-13-10	ID#	Edward & Judy Devine 2935 Devine Drive Fort Madison, IA 52627		30.00	1
3-13-10	CK#	Gene Fraise 1699 280th Avenue Fort Madison, IA 52627		15.00	1
3-13-10	CK#	Ray & Carleen Krogmeier 51 5th Street West Point, IA 52656		30,00	·
3-13-10	ID# CK#	Tyler Mills 104 Navajo Drive Kookuk, 14 52632		15.00	<b>V</b>
3-13-10	CK#	Un-Itemized Contributions		527.35	1
3-15-10	ID# CK# 1066	Fedler for Representative Ron Fedler 206 6th Street West Point IA 52656		25.00	1
3-15-10	CK# 2161	Janet Strunk 17 Tammy Lanc Fort Medison, IA 52627		25.00	1
			SUB-TOTAL "	22735	

TOTAL (If last page of this schedu

(for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinty (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS. SEE BACK OF FORM

**GEORGE SHIELDS** 

	SCHEDULE
COMMITTEE MAKE (Must be same as on Statement of Organization)	Rev 06/97) CONTRIBUTIONS
Lee County Democratic Control Committee	They was in continuous
The Greenit Jess	CHECK THIS BOX IF
Reset Form	AMENDING FORM

RECEIVED (MM/DD/VR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE "(if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	VIF FOR FUND RAISER CONTRIBUTION
3-13-10	Tev Grabble 1405 Ave.D FortMadison, IA 52627		Paper Suppliers, Che Kiro, Cutus, Pirth		4
3-13-10	Bub Mersultz 1405 Aug D Fest Madison, IA 57627		Nume Lishels, Sampater Enper-	1500	1-
3-13-16	Janet Fife Lationa 1122 Grand Avenue Konkuk, IA 58677		do 142 e	1000	4-
3-13-10	Louise Crozeo 3708 Whispering Line Keckuk, TA. 52632		Brownies st Mater	1000	
3-13-10	Jerry f Diznaktarns 402 Hickory Terri Keckuk, I A 52632		P.p. alater	14,25	4
			SUB-TOTAL	86.00	
			TOTAL (if less page of this schedule)	\$ 84.00	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the seminitiae. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no taminal relationship, enter "not applicable" in the relationship column.

Page 01 01 01 (for Schedule E)

For instructions, See Back of Form

#### CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Lee County Democratic Committee

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 688.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	FUND- RAISER INCOME
5:11-10	CK# 6650	Vern Banjamin 1537 27025 Street Aryyle, IA 52618-4658		\$ 2500	
	ID#	Hrygle, 14 52619-1658		4.5	
	CK#				
	ID#				
	CK#				
	ID#		<del></del>	<u> </u>	
	CK#				
	ID#				
	CK#				
	ID#				
İ	CK#				
	ID#				
	CK#				
Waterlands and	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
ì	CK#				
-			SUB-TOTAL	s 25.00	

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

TOTAL (if last page of this schedule)

Page 06 of 06

FOR INSTRUCTIONS. SEE BACK OF FORM

Reset	Form	

### EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES. LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE A LIST OF ID NUMBERS IS AVAILABLE FROM THE IDWA STHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
CHEC AME	CK THIS BOX IF NOING FORM

-				
DATE EXPENDED (MMJDD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1-14-10	CK# // 10	Rick Larkin 1304 Auc 13 Fild Madison, IA 52627	Ads for Democratic Brty Conons	5 /94/1
1-29-10	ID# CK#	FMB: KS Frant Ce, Inc 7th & Ave G Fort Madison, IA 52627	Sievichas & Tax	3.17
2-26-10	ID# CK#	FINBONKATINSTE, INC 7# & Ave G Ft. Nadison, IASZ627	Sugar Eligs & Tax	3 <del>23</del>
3-12-10	ID# CK# ///	PC Censultants, Ind 1325 Johnson St, Keekuk, IA 52632		215 40
3-12-10	CK# ///2	FN'Bank & Trustle, Inc. 7th & Aw. G Fort Madison, IA5427	Change at Concention	12000
3-1 <b>3</b> -16		Iser Gobbles 1405 HueD Fort Hadison, IA52627	Food fer Congessions	144.38
3-19-10	CK#	FMBank Grust Cu, Inc. 7126 Auunue G Fort Madison, IA 52627	Main Street Chroks (Blank Chocks)	30 <u>61</u>
3-31-10	ID# CK#	FM Bank & Toust Co., Inc. 75 & Avenue G Fort Madison, IA 52627	Sice. Chys. & Tax	3 42

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of cartain campaign property coating \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expanditures to persons/entitles providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expanditure made by the person/entity on behalf of the candidate's nonmittee. Person Schedule G instructions and lower Code 68A.402(3)(i).)

Page 01 of 02

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset	Form

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES. LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA STHICS & CAMPAIGN DISCLOSURE BOARD

Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTE	E NAME (Must be s	same as on Statement of Organization)		
Lee	County De	moeratic Central Commi	How	
DATE EXPENDED (MM/DO/YR)	CANDIDATE 1D NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursament) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7-16-10	ID#	Hy-Vee Flower 1 2606 Avenue L Fort Modison, IA. 57627	Stan Greenwold Mumovium	\$ 3210
4-30-10		FMBonk FTonster, Inc. 7th Avenue G Fact Mardison, IA 52627	See e. Chasic Tax	239
5-12-10	111-2	Fort Madison Community Solvent District 1930 Avenue 11 - FO. Bex 1423 Etillized Strange TA 52617	January (numes	7341
	ID# CK#			
	!D# CK#			:
	ID# CK#			
	ID# CK#		Water the second	
	ID# CK#			

71 WA			
IMIX KITE	ADDI ISE TO	CANDIDATES' CO	
	WLLFR IC	CANDIDA LES CO	MONTH LIBER ONLY

Purchases of certain campaign properly coating \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to personalentifies providing consulting, advertising, fund-taising, colling, managing, organizing services must also be detail item/zed on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. Refer to Schedule G instructions and lower Code 68A.402(3)(i).)

Page 02 01 02

SUB-TOTAL

TOTAL (if last page of this schedule)